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*Removal of restrictions on vessels from Glasgow and Liverpool.*HAVRE, FRANCE, *November 28, 1901.*

SIR: Referring to my dispatch No. 94 of November 7 last, relating to the sanitary inspection at Havre of vessels clearing for certain ports of France from Glasgow and Liverpool, I have the honor to inform you that the minister of the interior of France has decided that the above-mentioned British ports are no longer infected with the bubonic plague, and the quarantine officer of this port has been notified that the regulations requiring all vessels clearing from Liverpool and Glasgow to French ports from Pontorson to St. Valery-sur-Somme to first enter the port of Havre for medical inspection, are now no longer in force.

Respectfully,

A. M. THACKARA,
United States Consul.

Hon. ASSISTANT SECRETARY OF STATE.

GERMANY.

*Report from Berlin—Plague in various countries.*BERLIN, GERMANY, *November 30, 1901.*

SIR: I have the honor to transmit the following information obtained from the imperial health office at Berlin:

Plague.

FRANCE.—The steamship *Saghalien* of the Messageries Maritimes, which arrived from the Levant at Marseilles on November 7, with passengers and cargo, had to be sent back to Frioul on the 9th instant, as the sanitary officers found a large number of dead rats in the ship. The health of the passengers and crew was, however, good. After thorough disinfection the vessel was allowed to leave the quarantine station and on November 14 proceeded on the voyage to Constantinople.

GREAT BRITAIN.—In Glasgow up to November 18 no further case of plague had been recorded. The 4 isolated plague patients in the hospital are on the way to recovery.

RUSSIA.—Of the 2 deaths from plague in Odessa (the diagnosis being duly determined by bacteriological examination), the second of which occurred on November 2, one of the victims was a waiter in an eating house near the harbor, and the other was a German living in the center of the town, who it is claimed had not been in the vicinity of the harbor. Between November 10 and November 12, 3 further cases of sickness (supposed to be plague) occurred in Odessa.

EGYPT.—Between November 8 and November 15, 2 fresh plague cases occurred in Egypt.

BRITISH INDIA.—During the week ended October 25, 10,036 new plague cases occurred in the Bombay Presidency and 7,061 deaths (as compared with 10,284 cases and 7,427 deaths during the foregoing week). In the city of Bombay during the same period 175 new plague cases and 176 deaths were registered, while 183 deaths were designated as suspected plague.

CHINA—*Hongkong*.—For the seven weeks from August 17 to October 5, 31 plague cases and 29 deaths were recorded.

MAURITIUS.—During the period from September 6 to October 10, 193 cases of plague and 136 deaths occurred on the island.

MOZAMBIQUE.—In Magude, 140 kilometers from Lourenco Marquez, according to a telegraphic report of November 19, 5 cases of plague have been registered.

CAPE COLONY.—During the week ended October 26, 6 cases of plague

were recorded (4 in Port Elizabeth). According to an official report the total number of persons succumbed to the plague in the colony up to October 26, amounted to 402.

Respectfully,

FRANK H. MASON,
United States Consul-General.

The SURGEON-GENERAL,
U. S. Marine-Hospital Service.

[Translation.]

Supplementary report containing further data and statistics in regard to the success of the open-air treatment of consumption in the Empire of Germany.

[Compiled by government-councillor, Dr. Engelmann, of the imperial health office at Berlin.]

BERLIN, GERMANY, *November 29, 1901.*

In order to obtain trustworthy and exhaustive statistics respecting the results of the open-air treatment of consumptives, the imperial health office at Berlin has sent out blanks to be filled out by the directing physicians of the following institutions:

1. Loslau Sanitarium, established by the Union of Sanitaria for Consumptives in the government district of Oppeln.
2. Dr. Weicker's Home for Consumptives, in Görbersdorf (Silesia).
3. Dr. Brehmer's Sanitarium for Consumptives, in Görbersdorf (Silesia).
4. The People's Sanitarium at Albertsberg; established by the society for the establishment and maintenance of sanatoria for the people in the kingdom of Saxony.
5. Institution for Consumptives, in Reiboldsgrün (kingdom of Saxony).
6. The People's Sanitarium at Grabowsee, near Oranienburg.
7. The Vogelsang Sanitarium for Consumptive Women.
8. Convalescent Hospital, at Königsberg, near Goslar.
9. "Albrechtshaus" Sanitarium, near Stiege; established by the Brunswick insurance institution.
10. Oderberg Sanitarium.
11. "Glückauf" Sanitarium for Consumptive Females.
12. "Knappschaft" Sanitarium, at Sülzhayn.
13. Dr. Pintschovius' Sanitarium, at Altenbrak, in the Hartz.
14. Sophien Sanitarium, at Berka; established by the patriotic institute of the woman's union, in Saxony.
15. Sanitarium Ruppertshain, in Taunus.
16. Sanitarium, at Dannenfels.
17. Oberkaufungen Sanitarium.
18. Sanitarium, at Engelthal, near Hersbruck.
19. District Hospital, at Bonndorf (Württemberg).
20. Neustädte Home for Consumptives.
21. Consumptive Hospital, at Schömburg.
22. St. Blasien Sanitarium (Baden).
23. Institution for Consumptives, at Oberölkhofen.
24. Municipal Sanitarium, near Munich.
25. People's Sanitarium, at Planegg.
26. "Cure," district Sülzhayn, in the Hartz.
27. "Cure," district Andreasberg, in the Hartz.
28. Bad Rehburg (province Hannover).
29. "Cure," district Altweier (Alsace).
30. Hydropathic Institute, at Pullach, near Munich.
31. Bad Wartenberg (Upper Bavaria).

Sex of the patients.

Of the 6,273 patients treated during the period covered by the present report (a), 5,059 or 80.6 per cent were males and 1,214 or 19.4 per cent were females. According to the cards received at the imperial health office, the following institutions treated male patients exclusively: Loslau, Albertsberg, Grabowsee, Königsberg, Albrechtshaus, near Stiege, Oderberg, Sülzhayn, Altenbrak, Planegg, Bonndorf, Neustädtele, Oberkaufungen, and Engelthal; Vogelsang and Glückauf received female consumptive patients exclusively. Reiboldgrün had 50 cards for female patients and only 1 card for a male patient.

The relation between successful results and duration of treatment could be determined in the case of 6,195 patients, as shown by the following table:

Duration of treatment.	Persons.	Patients cured or improved.	Per cent.	Patients unimproved or grew worse.	Per cent.	Patients died.	Per cent.
Between 6 and 8 weeks.....	638	465	72.9	165	25.9	8	1.3
Between 8 and 10 weeks.....	667	528	79.2	135	20.2	4	0.6
Between 10 and 12 weeks.....	1,467	1,346	91.8	120	8.2	1	0.07
Between 12 and 14 weeks.....	1,768	1,630	92.2	136	7.7	2	0.1
Between 14 and 16 weeks.....	534	489	91.6	44	8.2	1	0.2
Between 16 and 18 weeks.....	404	358	88.6	44	10.9	2	0.5
Between 18 and 20 weeks.....	231	205	88.7	25	10.8	1	0.4
Between 20 and 26 weeks.....	300	261	87.0	39	13.0		
Between 26 and 32 weeks.....	86	75	87.2	10	11.6	1	1.2
Longer than 32 weeks.....	100	89	89.0	9	9.0	2	2.0

Permanence of the results of the open-air treatment.

There is nothing really wonderful in the fact that a consumptive patient after enjoying good food and proper nursing, and living for several weeks in the pure air of the forest or mountain, leaves the sanitarium in a much improved condition. Actual worth can only be claimed for such a result if it can be proven to be more or less permanent after the patient has returned to his everyday occupation. The figures relating to the permanence of the results form, therefore, without doubt, the most important part of the statistics. If a proper selection is made of patients likely to be benefited by the open-air treatment, the results must be regarded as satisfactory, even with respect to their permanence.

The following figures speak for themselves:

Results of subsequent examinations.

Time elapsed since discharge from institute.	No. of persons subsequently examined.	Capacity to earn a living was entirely preserved.	Capacity to earn a living was partly preserved.
Months—			
3 to 6.....	241	175=72.6 per cent.....	12=5.0 per cent.
6 to 12.....	552	338=61.2 per cent.....	43=7.8 per cent.
12 to 18.....	488	250=51.2 per cent.....	38=7.8 per cent.
18 to 24.....	293	141=48.1 per cent.....	23=7.9 per cent.
24 to 30.....	258	114=44.2 per cent.....	12=4.7 per cent.
30 to 36.....	165	67=40.6 per cent.....	4=2.4 per cent.
36 to 42.....	120	35=29.2 per cent.....	6=5.0 per cent.
42 to 48.....	30	4=13.3 per cent.....	2=6.7 per cent.

a As stated in Part I of the present series, the period covered by the present report extends from the beginning of 1899 to the middle of 1900.

Results of subsequent examinations—Continued.

Time elapsed since discharge from institute.	Capacity to earn living was suspended.	Died in the meantime.	Quite or partly able to work.	Not capable to earn living or in meantime had died.
Months—				
3 to 6	49=20.3 per cent ...	5= 2.1 per cent..	77.6 per cent.....	22.4 per cent.
6 to 12	117=21.2 per cent ...	54= 9.8 per cent..	69.0 per cent.....	31.0 per cent.
12 to 18	78=16.0 per cent ...	122=25.0 per cent..	59.0 per cent.....	41.0 per cent.
18 to 24	44=15.0 per cent ...	85=29.0 per cent..	56.0 per cent.....	44.0 per cent.
24 to 30	33=12.7 per cent ...	99=38.4 per cent..	48.9 per cent.....	51.1 per cent.
30 to 36	31=18.8 per cent ...	63=38.2 per cent..	43.0 per cent.....	57.0 per cent.
36 to 42	13=10.8 per cent ...	66=55.0 per cent..	31.2 per cent.....	68.8 per cent.
42 to 48	4=13.3 per cent ...	20=66.7 per cent..	20.0 per cent.....	80.0 per cent.

FRANK H. MASON,
United States Consul-General.

The SURGEON-GENERAL,
U. S. Marine-Hospital Service.

Investigation into the nature of cancer.

[Translation from the Frankfurter Zeitung, November 6, 1901.]

FRANKFORT, GERMANY, *November 15, 1901.*

As has been recently reported in these columns, the Institute for Experimental Therapeutics in this city has now begun an investigation relating to the ætiology of cancerous diseases. For this purpose considerable sums of money have been placed at the disposal of the institute by private persons. Two eminent surgeons have been called from Strassburg and Vienna, respectively, to assist in the investigation. The mistake should not, however, be made of expecting too much from this inquiry. The work of the institute is so extensive that it can give only a limited portion of its attention to this subject, and no change in the organization of the institute is contemplated. It is, therefore, not intended to treat patients suffering with cancer, and nothing has as yet been positively determined in regard to the extent and character of the investigation which is to be undertaken. In this direction science has before it a very difficult problem. The results which may be reached in Frankfort can, in the most favorable event, mean only a modest step forward on a long and tedious road.

The combating of this fearful enemy of humanity has long been a subject of investigation. For two years past there has existed in Buffalo, N. Y., a well-equipped institute for the study of cancer, where a number of prominent scientists are employed. For more than a decade the Pasteur Institute in Paris has also been quietly investigating the matter. The inquiry is now to be taken up here also by scientific men, and some success is hoped for, even if science be still destined to remain long in the dark in regard to cancerous diseases.

GEORGE H. MURPHY,
Vice Consul-General.

The SURGEON-GENERAL,
U. S. Marine-Hospital Service.